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UNIVERSITY OF ALBERTA

THE EFFECTS OF AN AFFECTIVE EDUCATION PROGRAM ON THE SELF-PERCEPTIONS OF GRADE SIX AND SEVEN STUDENTS

by
CONNIE DUQUETTE

A THESIS
SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE
OF MASTER OF EDUCATION
IN
SCHOOL PSYCHOLOGY

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA
Spring, 1990

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The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research for acceptance, a thesis entitled THE EFFECTS OF AN AFFECTIVE EDUCATION PROGRAM ON THE SELF-PERCEPTIONS OF GRADE SIX AND SEVEN STUDENTS.

submitted by CONNIE E. DUQUETTE

in partial fulfillment of the requirements for the degree of

MASTER OF EDUCATION

in SCHOOL PSYCHOLOGY.

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ABSTRACT

This study examined the effects of teaching the Skills for Adolescence program over a four to seven month time period to two grade 6 classes and one grade 7 class in a rural school district in northern Alberta. The following four instruments were used: Self-esteem Inventory (SEI); Behavioral Academic Self-esteem (BASE); Self-Concept Scale (SCS); Problem Check List (Mooney). The instruments were administered to all three classes before and after implementing the program except for the one class which started the program first and did not have the last two instruments at pretest time.

An increase in students' self-esteem was observed in the total self-esteem score and in the subscale score of social self-esteem as measured by the SEI. In addition, students' self-esteem as observed by their teacher increased significantly as measured by the BASE. Thus, student self-esteem is assumed to have increased after participating in the Skills for Adolescence program.

Neither the results of the SCS or the Problem Check list indicated a significant change. A negative correlation was observed between student self-esteem as measured by the SEI and the number of problems that students reported that they had on the Problem Check list. Thus students'

with lower self-esteem appeared to have more reported problems and students' with higher self-esteem had fewer problems.

The findings that student self-esteem increased after being involved in the Skills for Adolescence program is consistent with the literature that suggest that affective education programs can be effective in increasing student self-esteem.

Implications and suggestions for further research were discussed as a result of these findings.

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CHAPTER ONE

INTRODUCTION

> "How we feel about ourselves can make a difference in how we act, speak and even think" (Quest, 1986, p. 31).

Adolescence is often a period of turmoil and confusion for many. In North American culture, incidents of drug abuse, including alcoholism have contributed to a public outcry for programs to help adolescents cope with the pressures of an ever changing society. This study examined one such program, Skills for Adolescence, an affective education program specifically designed for early adolescence.

This program was approved in 1986 by Alberta Education as a supplementary resource for the Junior High School Health and Personal Life Skills Program. Even though the Skills for Adolescence program is currently being implemented in 293 schools in Alberta and 1155 in Canada (Taylor, 1989), research on the effectiveness of the program has not yet been published.

Background Information

Early Adolescence

The developmental stage of early adolescence has recently been recognized by many as separate from the general period of adolescence, and usually includes children from approximately ten to fifteen years of age. It is a period of rapid change in body size, body shape and intellectual functioning. As stated by Lipsitz (1978), "early adolescence is the second most rapid time of growth and change in human development. Only infancy exceeds early adolescence in velocity of growth" (p. 69). Therefore it is suprising that the stage of early adolescence has not been the focus of research until recently (Lipsitz 1977; Benson, Williams & Johnson 1987) and that little is known about this age group (Juhasz, 1985, p.877).

Beane & Lipka (1986) claim that "there is probably no more dramatic age period in the human lifespan than transescence or emerging adolescence" (p. 20). The period of early adolescence can be extremely difficult for many. Not only do they have to learn to cope with the physical and intellectual changes in their bodies, but they also have to learn to accommodate the changing social relationships with parents and peers. A complicating factor is the emergence of peers as a strong influence on the early adolescent's behavior and attitudes. These changes are occurring at the same stage in which the development of positive self-esteem is crucial.

Self-esteem and early adolescence

The attainment of positive self-esteem is regarded as important by a number of self-actualization theorists, in particular Carl Rogers and Abraham Maslow. Rogers believes that the need for unconditional positive regard is universal and that "children develop the need to view themselves positively" (Herganhan, 1984, p. 296). Maslow's (1987) hierarchy of needs reflects the innate motivation of human needs. He lists psychological needs, safety needs, belongingness and love needs, esteem needs and self-actualization as the core characteristics of personality. Maslow states that "all people in our society (with a few pathological exceptions) have a need or desire for a stable, firmly based, usually high evaluation of themselves, for self-respect or self-esteem, and for the esteem of others" (Maslow, 1987. p. 21). Furthermore, the development of both accurate self-concept and positive self-esteem are considered to be crucial for early adolescence (Beane & Lipka, 1986; Pope, McHale, & Craighead, 1988,).

Enhancing Self-esteem

The attainment of positive self-esteem is essential for all individuals, but it is especially important for early adolescents. Bayer (1986) proposes that schools through affective education have an opportunity to enhance student self-esteem and therefore can play an important role in the

development of healthy individuals. Swisher, Vicary & Nadenichek (1983) concluded from a tabulation of numerous affective education studies "that humanistic education has had a positive effect on education, particularly in terms of enhanced self-esteem and academic achievement" (p. 14). There are numerous research projects that have demonstrated that programs have been effective in improving self-esteem with specific populations. Research in the area of affective education for "normal" students in regular classes is limited; however, Burnett (1983) demonstrated that affective education can be effective in the regular classroom to enhance self-esteem.

Purpose of the Study

This study was designed to examine the effectiveness of the Skills for Adolescence program (Quest National Center, 1985) with students in grade 6 and 7 in a rural school district in Northern Alberta. The Skills for Adolescence program is described in the manual as a positive preventive program aimed at helping young adolescents develop the skills and self-confidence they will need as they grow through the teen years (Quest National Center, 1985).

Student self-esteem (self-reported and teacher observed) was examined, as well as the number of problems that students reported that they had. Three components of self-esteem (social-peers, home-parents

and school-academic), as well as the global self-esteem were observed. In addition, teacher observed academic self-esteem was examined. The last dimension of self-esteem observed was related to decision-making, interpersonal relationships, and responsibility.

Students were tested with the Coopersmith Self-Esteem Inventory (Coopersmith, 1981), Behavioral Academic Self-Esteem (Coopersmith & Gilberts, 1982), Self-Concept Scale (Percival, 1982); and the Mooney Problem Check List (Mooney & Gordon, 1952). Analysis of variance was conducted on the pretest and posttest scores to determine if changes were significant. In addition, the relationship between self-reported self-esteem and the number of problems that students have were obtained.

Significance of the Study

This study is significant for two reasons. First of all, it is important to examine the development of self-esteem, particularly in early adolescence. Self-esteem, the evaluative component of self-concept, has been found to have a positive relationship to school achievement, personal adjustment, and prosocial behavior. With regard to school performance, Beane and Lipka (1979) claim that "self-esteem seems to have a stronger relationship to school achievement than ability or motivation" (p.4). The importance of self-esteem in relationship to school performance is so

significant that Campbell (1981) proposes that negative self-concept is the most crucial variable impeding academic achievement in students. With regard to personal adjustment and prosocial behavior, many researchers have determined that negative self-regard is related to destructive behavior, anxiety, depression, and conformity to social pressures.

Secondly, it is necessary to examine commercially based affective education programs that are designed to enhance the self-concept and self-esteem of this age group. Previous research has mainly concentrated on elementary school children and has investigated such programs as Magic Circle, (Anderson, 1979; MacDonell, 1987), and Developing Understanding of Self and Others--DUSO (Koval & Hale, 1972; Stahl, 1977; Swindlehurst, 1978). Research on affective education programs in the upper elementary and junior high school years has been sparse. Specifically, upon reviewing the Skills for Adolescence program, only one study was located.

Consequently, this study should be of interest to those who develop, implement, and evaluate early adolescent affective education programs.

Delimitations

This study was delimited to two grade 6 classes and one grade 7 class in a northern rural school district for the time period of October 1, 1988 to May 30, 1989.

Limitations

The findings of this study might be unique to the classrooms in the district studied.

Overview of the Study

Following the introduction of the nature, purpose and significance of the study in Chapter one, a review of related literature and recent research is presented in Chapter two. In Chapter three, the subjects, instruments and procedures were outlined. The results of the data analysis and discussion of the results were included in chapter Four. A summary of findings, implications and suggestions for future research have been presented in Chapter Five.

CHAPTER TWO

REVIEW OF LITERATURE

In this chapter the most recent definitions of self-concept and self-esteem are presented. The self-concept and self-esteem needs of young adolescents and methods of enhancing these needs are described. The correlations and characteristics of self-esteem are listed, followed by a conclusion that the goal of enhancing student self-esteem is not only worthwhile but desirable. Stability and gender differences of self-esteem as well as influences of parents and peers are reviewed. Following a discussion of the ability of schools to enhance self-esteem, recent literature and research on effective health education programs are summarized. Finally, the Skills for Adolescence (Quest National Center,1985) program is described and analyzed.

Defining Self-concept and Self-esteem

In the past, the terms self-concept and self-esteem were often used interchangeably by researchers and educators; but recently they have come to be seen as two distinct dimensions of self-image (Battle, 1982; Beane & Lipka, 1986). This distinction has been followed in the present study.

Self-concept

Definitions of self-concept vary somewhat, but they have common themes. Most definitions include more than one dimension and include the perception of one's characteristics.

Felkner (1974) offers the following definition of self-concept:

> Self-concept is the sum total of the view which an individual has of himself. Self-concept is a unique set or perceptions, ideas and attitudes which an individual has about himself (p. 2).

Coopersmith and Feldman (1984) define self-concept as:

> The self-concept consists of the beliefs, hypothesis, and assumptions that the individual has about himself. The self-concept includes the person's ideas of the kind of person he is, the characteristics that he possess, and his most striking traits. The hypothesis, beliefs and assumptions about the self are organized into a self-image, that is, a picture that the person's view of what he is like and is used to explain himself to himself as well as to others (p. 198).

Beane and Lipka (1986) define self-concept as:

> ".. the description an individual attaches to himself or herself. The self-concept is based on the roles one plays and the attributes one believes he or she possesses. For example, in answer to the question, "Tell me about yourself, "a person might say that he or she is 'tall (or short) ..." Beane & Lipka, 1986, p. 5).

Furthermore, a person's self-concept does not have to be actually true or false, to be perceived as true by the individual. Consequently,

self-concept can be referred to as accurate or inaccurate, not as positive or negative (Beane & Lipka, 1986; Silvernail, 1981). Self-concept, then is the description that an individual gives himself or herself on more than one dimension.

Self-esteem

Self-esteem is most often considered to be a component of the overall self-concept, i.e., the evaluation component of self-concept.

Coopersmith (1967) defines self-esteem as:

> By self-esteem we refer to the evaluation which the individual customarily maintains with regard to himself: it expresses an attitude of approval or disapproval, and indicates the extent to which the individual believes himself to be capable, significant successful and worthy. In short self-esteem is a personal judgement of worthiness that is expressed in the attitudes the individual holds toward himself (p. 5).

Silvernail (1981) differentiates self-esteem from self-concept by stating:

> Self-esteem is the evaluative dimension of our self-concept. While our self-concept describes our perceptions, our self-esteem evaluates these perceptions. In essence, it is the value we place upon the various dimensions of our general self-concept (p. 9).

Beane and Lipka (1986) make the following distinction:

> Self-esteem on the other hand, refers to the evaluation one makes of the self-concept description and, more specifically, to the degree to which one is satisfied or dissatisfied with it, in whole or in part. For example, an individual might describe herself as tall (self-concept) and then go on to say that she is happy or unhappy about being tall (p. 6).

Self-esteem and self-concept have often been used interchangeably, yet there is a difference between these terms. Self-concept is the perception a person has of self in many dimensions; self-esteem, on the other hand, is the evaluative component of these dimensions.

Self-concept and Self-esteem Needs of Early Adolescents

Early adolescents are at a particularly vulnerable point in their development. With the changes that are occurring physically, emotionally and socially, it is imperative that early adolescents receive help in developing accurate self-concepts and positive self-esteem. The development of positive perceptions about self is particularly important at this stage because the determinants of one's behavior as an adult (self-concept, learning, interest, skills, and values) are largely formed during this period (Middle School Association, 1982).

Self-concept Needs

> "Of significant importance for emerging adolescents is an understanding of physical growth. With an understanding of maturation, the youngster is able to cope with a very rapidly changing life pattern." (Saylor, 1972, p. 47).

The early adolescent is either on the verge of or is undergoing one of the most rapid growth periods since infancy. These changes occur at different times and rates; therefore, early adolescents need help in understanding their changing bodies, as well as learning to accept these changes (Lounsbury & Vars, 1978). Furthermore, with this rapidity of change, the adolescent who cannot readily accept his new shape and revise his physical self-image may become overly self-conscious (Desjarlais, Rackauskas, Smith, Vytenis, Wermth & Stuss, 1975).

Along with the rapid physical changes the early adolescent is undergoing, he or she is also developing intellectually. Elkind (1973) discusses the acquisition of formal operation thought as enabling the adolescent to conceptualize his or her own thoughts as well as the thoughts of others. This ability to conceptualize thoughts often results in young adolescents becoming preoccupied in a search for their self-identity (Pope, McHale & Craighead, 1988, p. 20).

Elkind (1973) believes that young adolescents are primarily concerned with themselves because of the physical changes that they are undergoing. In addition, the adolescent's ability to conceptualize the thoughts of others

can result in the belief that others are also preoccupied with his or her appearances. This belief results in the adolescent continually reacting to an "imaginary audience" (Elkind, 1973). Thus, the young adolescent may come to regard himself, his feelings, and his reactions as something special and unique. Elkind (1973) calls this particular set of beliefs in uniqueness a "personal fable".

Early adolescents need help in understanding the changes that occur in their bodies and how these changes may affect their feelings and thoughts. It is important for young adolescents to realize that they are not alone and that these changes, feelings and thoughts are a shared experience and are not unique. Young adolescents need an opportunity to develop accurate self-concepts and to understand that their changes are not unique in order for them to develop healthy self-perceptions.

Enhancing Self-concept in the School

Beane and Lipka (1986) defined self-concept as the description an individual attaches to himself or herself. Therefore, they claimed that the enhancement of self-concept means to do one or more of the following:

1. Help clarify or sharpen the content of the description.
2. Help individuals develop an accurate self-description.
3. Suggest new dimensions that might be added to the description.
4. Encourage self-descriptions that are based on reality.
5. Encourage individuals to think in-depth about their self-concept.

6. Help individuals see themselves as others see them.
7. Encourage individuals to continually reflect upon their self-description in terms of clarity, accuracy, breadth, and depth.
8. Help individuals discover the sources of and influences upon the self-concept (p. 7).

Self-esteem Needs

> There is no value judgment more important to man--no factor more decisive in his psychological development and motivation--than the estimate he passes on himself. (Branden, 1969, p. 103)

The achievement of favorable self-esteem, the evaluative component of self-concept, is an extremely important component in the development of healthy individuals. In fact, it is considered to be crucial to the healthy development of young adolescents. Young adolescents are searching for an identity at a time when they are experiencing rapid physical and intellectual changes. It is important for them to experience the opportunity to have their self-esteem needs met.

Maslow (1987) considers the satisfaction of the self-esteem needs as leading to the development of feelings of self-confidence, worth, and capability. These feelings are necessary in order for people to lead productive normal lives. As early adolescence is a critical period in the development of these feelings, it is important that their self-esteem needs are met.

Four factors that have been shown to make grade school children experience high self-esteem are as follows: (a) children's relationships with their parents; (b) children's self-control of negative affect; (c) self-acceptance ; and (d) social conduct (Harter (1983) cited in Pope, McHale, & Craighead, 1988). These factors likely become increasingly important as children move into adolescence and experience rapid growth in physical, emotional and intellectual development.

Enhancing Self-esteem in the School

Self-esteem has been defined as the evaluation that one attaches to the various components of self-concept. According to Beane and Lipka (1986), one or more of the following may be effective in enhancing self-esteem.

1. Improve self-evaluation skills as a basis for evaluating the self-concept.
2. Encourage individuals to develop a sense of their own personal worth.
3. Help individuals reflect on their self-esteem and the values on which it is based.
4. Encourage individuals to think of themselves in positive terms.
5. Help discover reasons why the individual is unhappy with any dimensions) of the self-concept.
6. Help find ways to improve dimensions of self-concept with which the individuals are unhappy.,
7. Help individuals examine sources of and influences on self-esteem (p. 9).

Recent Research on Self-esteem Correlations and Characteristics

> One's behavior, in school and out, is primarily and largely determined by what one thinks of himself (Lounsbury & Vars, 1978, p. 6).

In this section, the terms self-esteem and self-concept are used interchangeably because some of the research does not distinguish between the two. However, according to the self-esteem definition presented, when researchers refer to positive self-concept, they are actually referring to self-esteem. The relationship between self-esteem, academic achievement, negative affect, and drug abuse, as well as the characteristics of individuals with high self-esteem and low self-esteem are presented. Many researchers have reported that high self-esteem or positive self-concept has been shown to be positively correlated to academic achievement and healthy development in schools. Conversely, low self-esteem or negative self-concept has been shown to be related to negative affect and drug abuse.

High Self-esteem Correlations

Brookover, Thomas, and Patterson (1964) demonstrated a significant and positive correlation between self-concept of ability and academic achievement. To defend their position that this relationship was not dependent upon intelligence, they partialed out IQ scores. The relationship between self-esteem and academic achievement is independent of ability.

More recent research (Simon & Simon, 1975) confirms the relationship between self-esteem and ability. Furthermore, self-esteem and achievement appear to constantly interact in a circular fashion (Battle, 1983) with high self-esteem influencing academic achievement and academic achievement influencing self-esteem. A conclusion has not been reached about which comes first--self-esteem or school achievement. However, self-esteem is an important component in the learning process. The importance of self-esteem to school achievement is highlighted by Beane and Lipka's (1979) statement that "self-esteem seems to have a stronger relationship to school achievement than ability or motivation" (p.4).

Characteristics of Individuals with High Self-esteem

Coopersmith (1967) describes the characteristics of persons with high self-esteem at length. Four of the characteristics determined by Coopersmith (1967) are that individuals with high self esteem: a) tend to be more independent in conforming situations; b) tend to be more independent in their activities; c) approach tasks with the expectation that they will be successful; and d) are relatively free of anxiety. These characteristics appear to be very important for the healthy development of people. In reference to adolescents, students who are able to approach

tasks with the expectation that they will succeed will be willing to try new tasks. Students who are relatively free of anxiety will be willing to try the uncertain and will be less worried about failure. Students who are more independent in their activities will be more willing to tackle the job of learning on their own. Students who are more independent in conforming situations will be more likely to resist negative peer pressure. All of these characteristics seem to be critical to the healthy development of adolescents and to their success in school.

Low Self-esteem Correlations

Self-esteem has been shown to be related to negative affect, drug abuse and dropping out of school. Purkey and Novak's (1984) concluded from their review of research that "persons with negative self-regard tend to be more destructive, more anxious, more stressful, and more likely to manifest psychosomatic symptoms than people of average or high self-regard" (p. 32).

Results of recent research confirm this conclusion and researchers have determined that it applies in particular to adolescents. Lorr and Wunderlich (1988) determined in a study of 1,902 high school students that individuals low in self-esteem reported greater anxiety, hostility, depression, self-doubt, fatigue and confusion that those high in self-esteem. Battle (1980) also determined in a study of 26 students, ages

15 through 18 years, that self-esteem was associated with depression.

In the area of drug abuse, Yanish & Battle (1985), in a study of 22 adolescents, determined that academic and parental aspects of self-esteem correlated negatively with alcohol consumption. Furthermore, they found nonsignificant correlations between scores on depression and alcohol consumption, indicating that the relationship between self-esteem and alcohol consumption was independent of depression .

In other studies of self-esteem and drug abuse, cigarette usage has been shown to be associated with lower self-esteem. This relationship was confirmed by Bonaguro, Rhonehouse and Bonaguro (1988). They determined in a study of 124 grade 5 students and 118 grade 7 students that lower levels of self-esteem were associated with increased willingness to use drugs.

Cadieux (1989) talked about the relationship between self-esteem and high school dropouts. He reported that students who drop out of school have low self-esteem and low self-confidence. At least one study has shown that enhancing self-esteem reduces the dropout rate. Canfield (1989) cited a four year long study by Gail Dusa that showed that a program designed to enhance self-esteem resulted in better school attendance and a greater percentage of school graduates.

Characteristics of Individuals with Low Self-esteem

Coopersmith (1967) describes persons with low self-esteem as: a) being particularly vulnerable to unfavorable opinion; b) being fearful of evoking anger; c) being more destructive, more anxious and more prone to manifest psychosomatic symptoms; d) tending not to resist social pressures; e) tend to lack self-confidence; and f) tending to be conscious of their inadequacies whether they are real or imagined. Battle (1987) expands on these characteristics by adding his findings that individuals who possess low self-esteem tend to: a) be more indecisive; b) conform more readily to social pressures; and c) exhibit a greater degree of dependence than individuals who hold themselves in high esteem.

These characteristics of individuals with low self-esteem are important in describing the relationship between: low self-esteem and depression; low self-esteem and anxiety; low self-esteem and drug abuse; low self-esteem and poor academic achievement; and low self-esteem and student's who drop out of school. For example, students who are fearful will be more likely to be anxious. Students who tend not to resist social pressures may be more likely to submit to pressures about using drugs. Students who are lacking in self-confidence and who are conscious of inadequacies are not as likely to take risks in the learning process. All of the characteristics and relationships of low self-esteem appear to inhibit

the development of healthy individuals.

In summary, the characteristics of individuals with high self-esteem are related to the development of healthy individuals and to success in school. In contrast, the characteristics of individuals with low self-esteem are related more to negative affect, drug abuse and dropping out of school. Therefore, the task of enhancing self-esteem is important and worthy of study. As Canfield (1986) states, "overcoming negative self-concept is one of the most prevalent problems facing all educators today (p. 24)." The next sections provide a brief summary of the recent research on adolescent self-esteem regarding gender differences, stability, parental influence and peer influence; afterwhich, the research on enhancing student self-esteem in schools is presented.

Recent Research on Gender and Self-esteem of Adolescents

Conflicting results are reported about the differences in self-esteem due to gender. Coopersmith (1967) in his original study on self-esteem did not find any differences due to gender. This was supported by Drummond, McIntire and Ryan's (1977) study of 296 males and 295 females from grades 2 to 12. They did not find differences in any of the subscales or the total scale score on either pretest or posttests. More recently, Calsyn and Prost's (1983) study on two fifth grade classes also did not find any

differences due to gender before treatment. However; they found indications of gender differences due to treatment.

In contrast, Bohan (1973) found lower self-concept scores for 10th grade girls than for any of the other groups from grade four, six and eight and ten. Simmons, Blyth and Van Cleave (1979) also observed that girls in grade seven had lower self-esteem than boys. However, they determined that this difference was only significant when the girls were attending a junior high school rather than a K-8 school. To further confuse the matter, Kokenes (1978) found no grade level differences but determined that a clear sex difference in the pattern of emergence of the factors related to school success.

In summary, the influence of gender on self-esteem has not been clearly established and may only be significant for certain age groups. However, indications of possible gender differences on self-esteem due to treatment have been presented. Therefore, research investigating the effectiveness of programs in enhancing self-esteem need to be aware of the possibility of gender differences due to treatment.

Recent Research on Stability of Self-esteem of Adolescents

Adolescent self-esteem has been shown to be relatively stable. Rubin (1978), in a longitudinal study of 380 children, determined that self-esteem

ratings become more stable as young people move into early adolescence. Subsequent studies support Rubin's (1978) findings. Prawat, Jones and Hampton (1979) in a one year study of early adolescents found no significant overall change in either self-esteem or locus of control. They concluded that these factors are less subject to developmental influence than had been thought. Dusek and Flaherty (1981) also concluded in their research that adolescent self-esteem remains relatively stable over time.

Silvernail (1981) summarized various studies that demonstrated that, if anything, for many students the trend is toward acquiring more negative self-images with each additional year of schooling, not of increasing self-esteem. Therefore, adolescent self-esteem can be considered relatively stable and, perhaps, gradually declining over an extended period of time.

When studying the effects of affective education programs with adolescents, researchers need to be aware that adolescent self-esteem can be considered relatively stable and if anything, self-esteem is more likely to decline with each additional year of schooling.

Recent Research on Student Self-esteem, Parents and Peers

> Students in the years 10 to 14 are at a stage in which value orientation is undergoing a transition from a family-adult base to a peer orientation. Youngsters are searching for deeper understandings of relations with peers, family, adults, and society (Saylor, 1972, p. 36).

Along with the physical and intellectual changes that the young adolescent is undergoing, they are also experiencing a change in relationships with others. The young adolescent gradually moves away from dependence on the family as social relationships becoming more important. The relative importance of parent versus peers to young adolescents has not been clearly established.

Lipsitz (1980) claims that parents are likely to continue to be "significant others" in the life of young adolescents. This is supported by Benson, Williams and Johnson's (1987) summarization of a study of 8,165 young adolescents. They report that "between fifth and ninth grade, peer influence increases and parent influences decreases. However, in no grade does peer influence outweigh the influence of parents" (p. 13). In contrast, Kokenes (1978) concluded from her findings that the peer group is a major source of positive self-esteem for adolescents. She found that the home occurred as a source of positive self-esteem only for fourth-grade males and sixth-grade females.

These differences may be due to differences in the families studied.

The study described by Benson, Williams and Johnson (1987) sampled 13 national youth-serving organizations, of which 10 were church bodies. The study was "clearly weighted to families which maintain an association with a local congregation" (Search Institute, 1984, p. 4). There was also a disproportionate number of single parents who did not participate in the survey, thus the descrepancy betweeen the two research results may be due to differences in the young adolescents' families composition and/or church affiliation.

The importance of parental communication with adolescents was determined in recent research by Matteson (1986). She showed that low self-esteem adolescents viewed communication with parents as less facilitative than did high-esteem adolescents. In addition, parents of the low group adolescents rated their communication with their children as more facilitative than did their children. High-esteem adolescent and parent ratings were congruent.

In summary, there is conflicting evidence about the relative importance of parents and peers on adolescent's self-esteem. The relative importance of each is not determined but it is sufficient to say that both are important in the development of the young adolescent's self-esteem. Despite the conflicting evidence on the porportion of parental versus peer influence, it is evident that both are significant influences on adolescent self-esteem.

Therefore, when studying the effects of programs that are designed to enhance self-esteem, the influence of parents and peers are important factors.

Recent Research on Enhancing Self-esteem in the School

> While pupil self-concepts tend toward consistency in order to protect the individual from anxiety, change in the self-concept is possible, since psychological growth is an ongoing process (Burns, 1982, p. 393).

Improvement in self-esteem is valuable both as an educational outcome in its own right, and for its relationship to academic achievement (Shavelson, Hubner & Stanton (1976). Average or high (not low) self-esteem is considered to be particularly crucial to the healthy development of young adolescents, yet a compounding problem is that adolescent self-esteem has been shown to be relatively stable. However, research has shown that self-concept can be enhanced in the regular classroom (Burnett, 1983). Both teachers and affective education programs are reported to be important in the enhancement of student self-esteem.

Teacher Effect on Self-esteem

It has been shown that once children enter school, teachers can influence the children's self-esteem (Battle, 1982; Purkey & Novak, 1984). Student self-esteem can be enhanced by both the kind of learning

environment that teachers establish in the classroom, and by their personal attitudes and actions toward the students (Coopersmith & Feldman, 1974). In relation to classroom climate, students need to feel comfortable and psychologically safe in a classroom. They need to feel secure enough to take risks in the process of learning (Lawrence, 1988). Beyond climate, Thomas (1980) showed that teachers' perception of students influence student achievement, behavior, and self-esteem. Lawrence (1988) summarizes the importance of teachers attitudes and behaviors toward children by stating that "although there are many aspects of classroom environment which may influence the student's self-esteem, the research shows that it is the teachers' day to day contacts with the students that has the greatest effect" (p. 27).

An additional component of the teacher's influence on students' self-esteem is the teacher's own perception of self. According to Lawrence (1988) the teacher with high self-esteem is likely to produce students with high self-esteem and the teacher with low self-esteem is likely to produce students with low self-esteem. Thus, not only is it important for teachers to be aware of their attitudes and actions towards their students; and to establish an inviting classroom climate, but it is also important for them to have positive attitudes towards themselves.

Burns (1982) lists seven conditions that he believes must exist for

teachers to be able to effectively interact with their students. The teacher needs to: a) make pupils feel supported by the teacher; b) make pupils feel responsible beings; c) make pupils feel confident; d) teach pupils to set realistic goals; e) help pupils to set realistic goals; f) help pupils evaluate themselves realistically; and g) encourage realistic self-praise.

In summary, teachers' attitudes and behaviors towards their students, as well as teacher's self-esteem are important components in influencing student self-esteem. In addition, classroom climate and quality of teacher-pupil interactions also seem to be related to student self-esteem. Thus, studies examing the effectivness of school programs in enhancing student self-esteem must be aware of these influences. Before looking at the affective education program studied in this research project, a review of recent research and literature on affective education programs is described.

Requirements for Effective Affective Education Programs

Research on affective education programs has shown that affective education or humanistic education programs have either enhanced self-esteem or have made no change in self-esteem. Swisher, Vicary, Nadenicheck (1983) in a review of humanistic education studies found that the vast majority of studies had positive outcomes for students involved,

with only 1 study having negative results, 14 having no impact, and 95 reporting significantly positive results. In the studies reviewed, improvements were noted in self-understanding, self-esteem, decision making skills, academic achievement and attitude. From their review, Swisher et al. (1983) determined that the best approach to humanistic education was to emphasize the basic processes involved and to integrate those into the ongoing academic activities of a school.

Recently, Bonaguro, Rhonehouse and Bonaguro (1988) investigated the effects of four school health education projects on substance use, self-esteem, and stress. The study included 161 adolescents in grades five through grade eight in rural areas. The programs studied were mostly lecture/discussion or film/discussion. In only one project, role playing was the predominate method of instruction. The programs were mainly conducted by personnel from community health agencies, with the teacher's role being a very minor one. In addition, instruction was provided for only a total of 8 to 10 hours. The results of all four studies showed no significant differences for school, peer, or home esteem. Bonaguro et al. (1988) recommended that programs designed to foster self-esteem and promote healthy behaviors need to be more extensive, need to be conducted by the regular teacher, and need to have better quality of instruction, i.e. not just lecture/discussion and film/discussion. They also claimed, that teachers

who were fully trained to use health education programs were found to teach far more of the program, with greater fidelity to the program design.

The importance of the role of the teacher is also highlighted by the following two research studies. Calsyn and Prost (1983) recommended from their research that in order for affective education to have a positive impact on the self-esteem of children the classroom teacher must be involved in implementing the program. In addition, Bayer (1986) concluded that affective education experiences that significantly enhance self-concept are those that involve the teacher as a facilitator.

Additional requirements for effective programs are summarized by Bonaguro et al. (1988). They outlined several characteristics of effective health education programs as presented by Bernard (1986). Six of the characteristics were:

1. targets all youth as opposed to only identified "high-risk" youth;
2. targets multiple systems and uses multiple strategies;
3. long-term duration (five years) with interventions beginning early;
4. sufficient quantity of prevention (adequate time per intervention an
5. integrates prevention activities into family, classroom, school, and community life; and
6. builds a supportive environment that encourages participation and responsibility (p. 88).

Characteristic number one is supported by Stilwell and Barclays' (1979) research. They found that activities that involved the entire class were the most effective in improving the self-esteem of all students, highs and lows.

Contrary to Bonaguro et al.'s (1988) study of four health education programs and opposing to Bernard's third characteristic (long term duration), other researchers have found that short term programs resulted in changes in self-esteem. Calsyn and Prost (1983) indicate from their study of two fifth grade classes that a relative short (one 40 minute period for eight weeks) can have a positive impact on the self-esteem of children. Omizo and Omizo (1987) determined that the self-esteem of 60 learning disabled children (12 to 15 years old) were enhanced through a seven week group counselling program. Wanat (1983) found that the teaching of a social skills awareness program to 15 grade 10 to 12 students for 55 minutes a day for 80 consecutive days was effective in increasing self-esteem when compared to the control group. Bayer (1986) in his research of 30 students from a grade seven health class participating in two different affective education experiences for three weeks found an increase in self-esteem. Programs, then, that have resulted in positive changes in self-esteem have varied from three weeks to 16 weeks. Implications from these results are unclear, but perhaps short-term programs may result in short term changes and long term-programs may result in long term changes.

Finally, a conclusion reached by Rogers (1987) in his discussion of early adolescents (which supports Bernard's characteristics five and six) is that

self-esteem cannot be enhanced in isolation. Rogers (1987) states that "Indeed environmental aspects which permeate the entire structure and program of schools are responsible for either 'facilitating' or 'debilitating' levels of self-esteem" (p. 20).

In summary, some affective education programs are effective while others are not. What makes some effective and others not? There is not one attribute that makes a program effective. From the review of recent literature and research results, successful programs appear to have a variety of characteristics/components that influence outcomes. The teacher, teaching style, teaching methodology, pre-inservice training, content, program length and program delivery all appear to be factors in determining effective programs. In the next secion, an attempt is made to demonstrate how the Skills for Adolescence program is consistent with the research reviewed.

Skills for Adolescence Program

Background Information

The Skills for Adolescence program (1985) developed by Quest International in cooperation with the Lions Club International is a positive prevention program aimed at helping young adolescents develop the skills and self-confidence they will need as they grow through the teen years

(Quest, 1985). Joan Lipsitz, director of the Center of Early Adolescence, was quoted as stating the "Skills for Adolescence is built on the most recent and reliable research findings about young adolescents and is one of the most exciting life skills programs I've seen for a long time" (Gerler, 1986, p. 438). The program began as an idea in February, 1983 as a result of an International Symposium on Drug Abuse at Lions International Headquarters. As a result of the symposium the Lions' mandate was to make "available a professionally prepared educational curriculum designed to develop personal strengths to help youths resist drugs" (Quest National Center, No date, p.1). This supposition was supported by Botvin's (1986) review of research that determined that programs designed to enhance self-esteem and develop responsible decision-making appear to produce significant reductions in substance abuse. The Skills for Adolescence curriculum was introduced in 1984 and by June 15, 1989 more than 1156 schools across Canada had adopted the program (Taylor, 1989).

Program Design

Rick Little (1988), founder of Quest, describes Skills for Adolescence as a multi-faceted approach that provides students with practical life skills. "These include providing youngsters with decision-making skills for saying no to drugs and alcohol along with methods for improving their

self-esteem so they can resist negative peer pressure" (Little, 1988, p.2).

The Skills for Adolescence program includes the following topics: a) understanding the changes of adolescence; b) building self-confidence and communication skills; c) understanding and managing feelings; d) improving friendships and resisting negative peer pressure; e) strengthening family relationships; f) making wise and healthy decisions, especially regarding alcohol and drug use; and g) setting goals for successful and healthy living.

The following statments made by Kanopka (1973) and more recently by Kramer (1988) give support to the design and content of the Skills for Adolescence program. Kanopka (1973) stated that some of the adolescent requirements for healthy development are to gain an experience in decision-making, to interact with peers and to acquire a sense of belonging. Kramer (1988) also described lack of self-respect, the inability to communicate thoughts and feelings on an intimate and genuine level, and few, if any, conflict resolution or decision-making skills as roots of the adolescent problems (drug abuse, teenage pregnancy, suicide, violence and dropping out of school). The only way to prevent symptoms of adolescent problems is to help youth in the crucial areas of self-esteem, communication and conflict resolution (Kramer, 1988).

The Skills for Adolescence program is based on a conceptual model involving certain external and internal conditions that need to be met so

that young people will develop positive social behaviors (Quest National Center, No date, b). The external conditions include the following: an emotionally safe environment, a positive and caring classroom climate and mutual respect. These conditions are consistent with those presented by Burns (1982). The internal conditions include the perception of oneself as capable, worthy, and in control. This is also consistent with Maslow's theory of a hierarchy of self-esteem needs.

Sessions usually begin with an activity starter, then proceed to brainstorming and processing. Processing activities include discussions or written responses to question and statements such as, "I learned that I....' and, "I was surprised that ..." This teaching strategy is supported by research, as programs that emphasized process were found to be more effective than programs that emphasized content (Swisher et al., 1983; Botvin, 1986).

The program is taught with the teacher being a facilitator rather than a lecturer which is consistent with the research by Bayer (1986). In addition, teachers are required to attend an intensive three day workshop before implementing the program. This practice is harmonious with Bonaguro et al.'s (1988) implication that teachers need to be fully trained to adequately teach a program.

The Skills for Adolescence program meets many of the characteristics

of an effective health education program as proposed by Bernard (Bonaguro et al. 1988). The first characteristic (targets all youth) is met as the Skills for Adolescence program targets the whole population of early adolescence not just special groups. The program satisfies the second characteristic (targets multiple systems and uses multiple strategies) as it uses a multimodal approach. The third (long term duration) and fourth (sufficient quantity of prevention) characteristics may be met as it is designed to be taught over one semester (daily) or one year (every second day) for one to three years; however, research results have not shown clearly what is long enough and what is sufficient quantity. It is also consistent with the fifth characteristic (integrates prevention activities into family, classroom, school, and community) as the program is designed to involve parents, school, and community life. Lastly it is consistent with characteristic number six (encourages participation and responsibility) as one component requires participation and responsibility through a learning service model. The learning service model requires students to be involved in a service project either at a school level or a community level.

Research on the Skills for Adolescence Program

Only one study on the Skills for Adolescence program was found. This was an unpublished research study conducted by Stephen Jurs in 1985 of

300 students in grades 6, 7 and 8. The instrument used in the study was a pilot form of the Young Adolescent Inventory. The inventory as reported by Jurs (1985) is "a brief, self-report questionnaire which includes questions about a variety of topics such as self confidence, communication skills, family, peer pressure, and school" (p. 1). He observed that students who participated in the Skills for Adolescence program experienced positive effects when compared to an equivalent group of students who did not take the course. Jurs concluded that "the Skills for Adolescent students had significantly more positive attitudes toward teachers, were more able to resist peer pressure, and related better to others" (Jurs. 1985. p. 3).

To date, no published research has been located, nor is the Quest National Center (Taylor, 1989) aware of other studies on the Skills for Adolescence program being completed; however, a major study is being planned to begin September, 1989 (Peters, 1989).

Measuring Effectiveness of the Skills for Adolescence program

Since minimal research had been conducted on the Skills for Adolescence program, a way of measuring the effects of the program needed to be addressed. The goal of improving self-esteem was given as one of the goals by Little (1988). Therefore, the effectiveness of the Skills for Adolescence program in enhancing self-esteem was determined to be an

area of study. However, research does not indicate the best instrument for measuring self-esteem. The issue of measuring self-esteem is further complicated by the frequent usage of the terms self-concept and self-esteem interchangeably. Hughes (1984) considers in his review of self-concept and self-esteem measures that many "so called 'self-concept' instruments to be actually be measures of self-esteem, since the scales are ususally designed to elicit evaluations of, or positive or negative feelings, about characteristics selected by the investigator (p. 659)." Since the more recent accepted definitions of self-esteem (the evaluative component of self-concept) and self-concept (the description an individual gives about oneself in several dimensions) differentiate one from the other, a distinction is required between tests that measure self-esteem and tests that measure self-concept.

Three tests were reviewed for use in this study: the Behavioral Academic Self-esteem (BASE) (Coopersmith & Gilberts, 1982); the Self-Esteem Inventory (SEI) (Coopersmith, 1981); and the Piers-Harris Children Self-Concept Scale (CSCS) (Piers, 1984). All three were determined to be measures of self-esteem (Hughes,1986). The three tests were also recommended for use in research when global self-esteem score is needed (Chiu, 1988).

A review of additional instruments was made to measure aspects of

self-esteem or self-concept pertaining to decision-making skills and interpersonal relationship skills. Only one instrument, the Self-Concept Scale (SCS) (Percival, 1982), measuring these concepts was located. Neither research nor reviews of this test was found, but the test appears to be another measurement of self-esteem rather than of self-concept.

Self-concept scales that are consistent with more recently accepted definitions of self-concept were not found. The construct of self-concept (the perception that one has of oneself in many dimensions) is a complex one and is not easy to measure. If self-concept is to be referred as accurate or inaccurate (Beane & Lipka, 1986; Silvernail, 1981), methods of determining whether a person's self-concept is accurate or inaccurate must be used. No instruments were found to determine if self-concept was accurate.

The final test reviewed was the Mooney Problem Check List (Mooney & Gordon, 1950). The Problem Check List was developed to help students express their personal problems. It is designed as an instrument for enhancing communication between students and counselors or teachers. Mooney and Gordon (1950) report in the manual that the Problem Check List can be given before and after the implementation of a program to measure its effectiveness.

In summary, each of the first three tests reviewed for use in this study

appear to measure self-esteem even though one is called a self-concept scale. All three have been recommended for use in research. The SCS was a new instrument with no research data available. The Problem Check List was an older instrument designed to enhance communication between students and adults but the authors reported that it may be used also in research.

Conclusion

Self-esteem enhancement has been shown to be a very important component of school programs that promote the development of healthy adolescents. The Skills for Adolescence program is one that is designed to enhance self-esteem and to develop self-confidence in young adolescents, thereby, providing opportunities to develop positive social behaviors and resist using drugs. The program is being implemented in 1152 schools across Canada with virtually no research having been conducted on the effectiveness of the program. Therefore, the method and the data presented in this study are important and have implications for further research.

CHAPTER THREE

DESIGN OF THE STUDY

This chapter includes a description of the subjects and how they were selected. Subsequently, the four measurement devices are described and the rationale for choosing them explained. The procedure for the study is outlined in the last section.

Subjects

The study began with 81 grade six and seven students in a small rural community in northern Alberta. The students attended two separate K-7 elementary schools located in the community. Students from three out of a total of seven grade six and seven classes were selected to be involved in this study.

These classes were chosen for two reasons. The first reason was that the teachers had expressed an interest in offering the program to their students beginning in January of 1989 which enabled the researcher to arrange for pretests data to be collected. The second reason was that the students in theseclasses had not been exposed to the Skills for Adolescence program previously. Some of the students in the other classes had started the program earlier or had been involved in the program the previous year.

In total, three classes of students were involved in this study. Class A, the grade six class in the first school, originally consisted of 28 students (16 males and 14 females) but due to large enrollment of sixth grade students in the school, students were transferred to a new class formed in February, reducing class A to 19 students (11 males and 8 females). Class B, a grade six class in the second school, initially consisted of 27 students (gender not reported). Class C, a grade seven class, also at the second school, consisted of 26 students (15 males and 11 females) at the beginning of the year.

Test Instruments

Four test instruments were chosen to measure several dimensions of self before and after the implementation of the program. The four instruments were as follows: 1) the Coopersmith Self-Esteem Inventory: School Form (SEI) (Coopersmith, 1981); 2) the Behavioral Academic Self Esteem (BASE) (Coopersmith & Gilberts, 1982); 3) Self-Concept Scale (SCS) (Percival, 1982); and 4) the Mooney Problem Check List: Junior High School Form (Mooney & Gordon, 1950). As Demo (1985) indicates that a variety of methods is necessary to adequately measure self-esteem, three instruments were chosen to assess several dimensions of self-esteem. The

fourth test was chosen to investigate an additional area that might be affected by the program.

Coopersmith Self-Esteem Inventory (SEI)

Since the overall goal of the program studied is to enhance student's sense of self-worth or self-esteem, measurement of global self-esteem was the main focus of this study. The SEI (Coopersmith, 1981) was chosen as the best measure of self-esteem for the purposes of this study. The School Form, to be used with students aged eight through fifteen, consists of 50 short statement items. Students answer all statements by marking an X in the column "Like me" or "unlike me." The raw score is multiplied by 2, resulting in a minimum score of 0 and a maximum score of 100.

The SEI is reported to be one of the best known and widely used self-esteem measures (Johnson, Redfield, Miller & Simpson, 1983; Adair, 1985). It is also well researched and well documented (Chiu, 1988; Adair, 1985) and is recommended for use in research (Peterson & Austin, 1985; Sullivan & Guglielmo, 1985; Adair, 1985). In addition, it has been used in numerous research studies recently to measure self-esteem in children and adolescents (for example: Wilson & Rotter, 1986; and Matteson, 1986).

The manual includes several reliability results based on numerous studies. In one study based on 1650 grade six students and 1539 grade

seven students, internal consistency coefficients on the School Form using Kuder Richarson reliability estimates (KR_{20}) were reported to be .88 for grade 6 and .89 for grade 7. Reported test-retest reliability research results varied from .88 for 50 grade 5 children (five-week interval) to .64 for 194 children in grades 5 and 6 (twelve-month interval).

Because of its widespread use, and apparent validity, the SEI was selected as the best measure of global self-esteem. In addition, the SEI was chosen for this study because of the applicability to the goals and content of the program being studied.

The four subscales of the SEI differentiate situation specific perceptions of self that appear to be applicable to the Skills for Adolescence program. The SEI "is designed to measure evaluative attitudes toward the self in social, academic, family and personal areas of experience" (Coopersmith, 1981). As this research was designed to measure the effects of a program involving interpersonal relationships with peers and family as well as perceptions about self, the subscales were seen as a method of measuring self-esteem related to these areas.

The 50 items on the SEI are divided among four subscales designed to measure evaluative attitudes toward the self in social, academic, family and personal areas of experience. The first subscale, Social Self-Peers, consists of 8 questions such as, "I don't like to be with other people" and

"Kids pick on me very often." The second subscale, Home-Parents, consists of 8 questions, such as, "My parents usually consider my feelings" and "No one pays attention to me at home." The third subscale, School-Academic, also consists of 8 questions with questions such as , "I often get discouraged in school" and "I'm proud of my school work." The fourth subscale, General Self, consists of 26 questions such as, "Things ususally don't bother me" and I give in easily." In addition, an eight item Lie scale is included to deal with the problem of test wiseness or defensiveness." Calsyn & Prost report that the Lie scale can be used to deal with the problem of "some respondents reporting more positive feelings about self than true feelings (Calsyn & Prost, 1983, p. 61).

These subscales are reported to be factorially valid as determined by Kokenes'(1978) research,. In subsequent research of 1397 grade six to eight students, Roberson and Miller (1986) concluded that the Social-Peers, Home-Parents, School-Academic, and Lie Scale appear to measure distinguishable features of self-concept. In addition, Johnson et. al. (1983) reported internal-consistency coefficients of the subscales as Social-Peers, .61; Home-Parents, .61, School-Academic, .61; General Self, .71 and Lie scale, .63. Therefore, the subscales appear to measure reliable and distinct information about self-esteem.

Behavioral Academic Self-Esteem (BASE)

The BASE (Coopersmith & Gilberts, 1982) was chosen as an additional measure of self-esteem that is obtained from an observer rather than from a self-report. The BASE scale is designed to measure children's academic self-esteem by using direct observation of their classroom behaviors. Five categories are included: 1) Student initiative; 2) Social Attention; 3) Success/Failure; 4) Social Attraction; and 5) Self-Confidence. Information was not provided on the reliability of the five categories. In addition, some of the categories contain just two items. Therefore for the purpose of this study, only the total score on the BASE was analyzed, not the category scores.

The BASE contains 16 statements such as "This child refers to himself or herself in generally positive terms." Teachers rate how frequently the student demonstrates a particular behavior in the classroom on a 5-point scale (1 indicating never and 5 indicating always). The minimum score is 16 and the maximum score is 80.

The BASE appears to have sufficient validity and reliability to be used in research (Chiu, 1988). In the manual, Coopersmith and Gilberts (1982), report internal consistency scores of .83 for boys and .84 for girls. In addition, Sullivan and Guiglielmo (1985) cite Sullivan's research showing strong internal consistency of the BASE, with Cronbach's alpha (a=.88). The

construct validity is supported by Johnson et. al.'s (1983) research findings that the SEI and the Piers-Harris Self-Concept Scale and the BASE showed convergent validity. They also found an average inter-rater agreement for the BASE to be .86 which demonstrates that it is reliable.

Self Concept Scale (SCS)

The SCS is a criterion referenced self-report containing 50 statements such as, "I am good at making decisions" and "I work well in a group". However, these statments appear to reflect self-esteem rather than self-concept. Students are to fill in the circle of the best descriptor about themselves for each statement, using a 6 point scale (6 indicating very much like me and 1 indicating not at all like me). The only technical data provided in the manual was that the standard deviation of each statement was approximately 5. This instrument is a relatively new instrument and no published research was found using the SCS. However, the author reports in the manual (Percival, 1982) that pretesting and posttesting to determine gain after implementation of a program is the logical method for using the scale.

The advantage of the SCS was the inclusion of 5 subscales, in particular the first two. The 50 items were divided into 5 subscales of 10 items each: 1) Decision making (DM); 2) Interpersonal relations (IR); 3) Responsibility

(R); 4) Cit izenship (C); and 5) Career Planning (CP). The first two subtests of decision making and interpersonal relations appeared to be directly related to the specific curriculum objectives of the affective education program studied. Therefore the SCS, but primarily the first two subscales, was chosen to examine student self-esteem related to decision-making skills and interpersonal relation skills.

Descriptive statistics, internal consistency and correlation between subscales were obtained on the SCS from a sample of 100 students. Fifty grade 6 and 50 grade 7 students from a northern Alberta community completed the SCS in June, 1989. The total SCS score and the five subscale means, deviations and internal consistency results are listed in Table 3-1.

TABLE 3-1

Means, Standard Deviations and Internal Reliability of SCS

	Total SCS	DM	IR	R	C	CP
Mean	219.8	36.4	40.6	43.2	51.5	47.8
Sd	29.4	7.3	9.3	8.4	7.1	6.4
Int. cons.	.91	.72	.84	.81	.81	.56

Internal consistency scores ranged from .72 to .91 on the total SCS and the first four subscales, indicating that the SCS and the first four subscales were reliable. For this study only the first three subscales were

examined as they appeared to be related to the program objectives.

Mooney Problem Check List

The last instrument was chosen to measure student perceptions of their concerns. The Mooney Problem Check List was revised in 1950 from an earlier version developed during the early 1940's to help students express their personal problems. The Junior High School Form include a list of 210 problems that are divided into seven categories: 1) Health and Physical Development (HPD); 2) School (S); 3) Home and Family (HF); 4) Money, Work, the Future (MWF); 5) Boy and Girl Relations (BG); 6) Relations to People in General (PG); and 7) Self-centered Concerns (SC). Students are to underline the problems which are of concern to them, circle the ones of most concern, and write a summary in their own words.

For the purposes of this study, just the problems that students indicated by underlining were examined. Scores were obtained by adding the total number of problems underlined in each area, then the overall total was computed. The potential scores, therefore, ranged from 0 to 210.

Mooney and Gordon (1952) state that the score obtained is to be "regarded only as a 'census count' of each student's problems--limited by his awareness of his problems and his willingness to reveal them". In addition, the authors caution researchers that the treatment "may actually

reduce the real problems but the changed atmosphere may lead to an increase in expressed problems (Mooney & Gordon, 1952, p. 11).

Information provided in the manual states that internal consistency methods are inappropriate in establishing reliability because the Problem Check List is not a test. However, a study is cited whereby the Problem Check List, repeated from one to ten weeks, obtained rank order correlation coefficients from .90 to .98. In addition, Allen (1984) concludes that the results of two studies reported by the authors "appear to indicate considerable stability of pooled results for groups" (p. 497). Therefore some evidence is provided for the reliability of the Problem Check List. Mooney and Gordon (1952) report in the manual that the Problem Check List can be given before and after the implementation of the program to measure its effectiveness.

Procedure

Teachers of three classes in a small school district attended a workshop in October to learn how to implement the Skills for Adolescence Program. The teacher of class A had the necessary materials and decided to implement the program immediately. He administered two tests (the SEI and the BASE) prior to implementation to measure the effectiveness of the program. Class B and class C implemented the program at the beginning of

February, 1989. All four pretest instruments were administered to class B and class C.

The researcher obtained permission for the Quest Center in Ontario to conduct research in October, 1988. Approval was obtained from the University of Alberta Ethics Committee on December 14, 1988. Permission from the School Board was received January 17, 1989. Parental permission was sought by the researcher in cooperation with the home room teacher to permit students to participate in the study. The homeroom teacher of class A received permission from all parents and released the tests that he had administered in October to the researcher. Class B and Class C were given all four pretests during the first week of the program.

The three classes implemented the program in their regular health period, each with slight variations. As mentioned previously, Class A began in October. Sessions were conducted for one 40 minute period and one 65 minute period a week by the regular class teacher. Class B began the program in February. Sessions were conducted for one 40 minute period by the regular class teacher team-teaching with the guidance counsellor and a second 40 minute session per week by the guidance counsellor alone. Class C also began the program in February and sessions were conducted for two 40 minute periods a week by the regular class teacher.

During the first week of June, all classes were given the four

measurement instruments described previously. However, in class A, posttest results were only obtained for the 16 students that remained in Class A. Therefore, the class A pretest data only included the first two measurement instruments and the posttest data included the four tests for 16 students. The teacher of class B released the complete set of tests for 22 students (three parents did not give permission for their child's scores to be included in the study and one student moved away). The teacher of class C released the complete set of tests for 22 students (one set of parents did not give permission for their child's scores to be included in the study and three stduents moved away). The tests were marked by the researcher to avoid teachers' bias that may have influenced their interaction with the students during the program implementation and subsequent evaluation of student self-esteem on the BASE.

In addition, the researcher observed the program being taught in each of the classes to gather additional information about program implementation.

CHAPTER FOUR

DATA ANALYSIS

In this chapter the results of the data analysis are presented. The data for each of the five hypotheses are analyzed separately and the results are discussed.

Data Analysis on the Self-Esteem Inventory (SEI)

Student self-esteem as measured by the SEI will increase after participating in the Skills for Adolescence program.

Upon examination of the students' answer sheets, several were found to have frequent item responses that had double markings, no markings and/or a mark placed between the two responses. Comments such as "I don't know" and "I'm not sure" were sometimes written alongside these instances. As the instructions for the SEI request that students respond to every question by marking an X in either the "Like me" column or "Unlike me" column, these unmarked responses added an unknown dimension to the test scores. Student scores with invalid responses were removed to form a subset for each of the three classes.

The means and standard deviations were calculated for both the original scores and for the subset group (scores with more than 3 invalid responses removed), to determine if these invalid responses affected the results.

These means and standard deviations, of the original group scores when compared to the subgroup scores, were observed to be different for each class with the largest difference of 10 points observed in Class A. Therefore, student scores that had more than three missing responses, double responses, and/or third responses occurring were removed from the data file. As a result, three student scores were removed from Class A; four from Class B; and two from Class C, resulting in the analysis of variance being conducted on test scores of 13 students from Class A; 17 students from Class B, and 19 students from Class C.

Using the uanova program, two way multivariate analyses of variance were run on the total SEI scores, the School subscale scores, the Social subscale scores, the Home subscale and the Lie subscale scores. Since the program implementation varied in each class due to length, number of minutes scheduled and personnel involved, an analysis of variance was conducted with three levels--Class A, Class B, and Class C. Silvernail (1981) concluded that for many students the trend is toward acquiring more negative self-images with each additional year of schooling, therefore a second analysis of variance was conducted with two levels--grade 6 versus grade 7. In addition, since Calsyn and Prost had found indications of gender differences due to treatment in their research, a third analysis of variance was also conducted with two levels--males versus females. All three used

time as the second factor with pretest versus posttest being the two levels of time.

Effects on students grouped together and by classes

Correlations between the Lie subscale and SEI total were calculated to determine defensiveness of students' responses. According to Calsyn and Prost (1983) a correlation of 0 would indicate that the "two measures were tapping two different constructs and, more importantly, that the self-esteem scores were not biased by some sort of social desirability or defensive response" (p. 63). Class A correlations at the pretest ($r = .09$, $p = .34$) and the posttest ($r = -.08$, $p = .40$) were very small and not significantly different from zero. The correlation of Class B at the pretest ($r = .45$, $p = .03$) was significantly different from zero but the correlation at the posttest ($r = .27$, $p = .14$) was not. Class C correlations at the pretest ($r = .21$, $p = .19$) and at the posttest ($r = .23$, $p = .17$) were not significantly different from zero. These results suggest that only Class B pretest results may have been biased by a defensive response. The other test results appear to be an accurate reflection of self-esteem that is not biased by defensiveness.

Table 4-1 shows the pretest and posttest means for the combined group and for the three classes on the total SEI and the three subscales

considered. The increase of the mean score for the total SEI on the classes varied from .9 to 6.6, with the overall change 4.3. Changes on the Home subscale varied form -.1 to .8, with the overall change being .3. Changes on the Social subscale were all in the positive direction with the overall mean change being .4. Changes in the School subscale varied from 0 to .5 with the overall change being .4.

TABLE 4-1

Means of Combined Group and Classes

	Combined		Class A		Class B		Class C	
	pre	post	pre	post	pre	post	pre	post
Total SEI	69.7	74.0	75.7	82.3	70.0	74.5	66.9	67.8
Home	6.0	6.3	7.0	7.3	5.6	6.4	5.7	5.6
Social	6.0	6.4	6.5	6.9	6.1	6.5	5.5	6.1
School	4.8	5.2	5.3	5.8	5.1	5.6	4.4	4.4
	n = 49		n = 13		n = 17		n = 19	

As shown in Table 4-2, the effect of time was significant for the total SEI [$F(1, 46) = 7.07$, $p=.01$] and the Social subscale [$F(1, 46) = 6.74$, $p = .01$]. Students' self-esteem is assumed to have changed in the area of global self-esteem and social-peer self-esteem. Changes on the Home subscale and the School Subscale were not significant. The difference between the

classes due to the interaction of the program on the three classes was not significant on any of the subscales nor on the total SEI. The differences between the classes were also not significant, although the differences in the means were fairly large. The largest difference was between Class A and Class C on both pretest (difference = 9.2) and posttest (difference =14.5).

TABLE 4-2

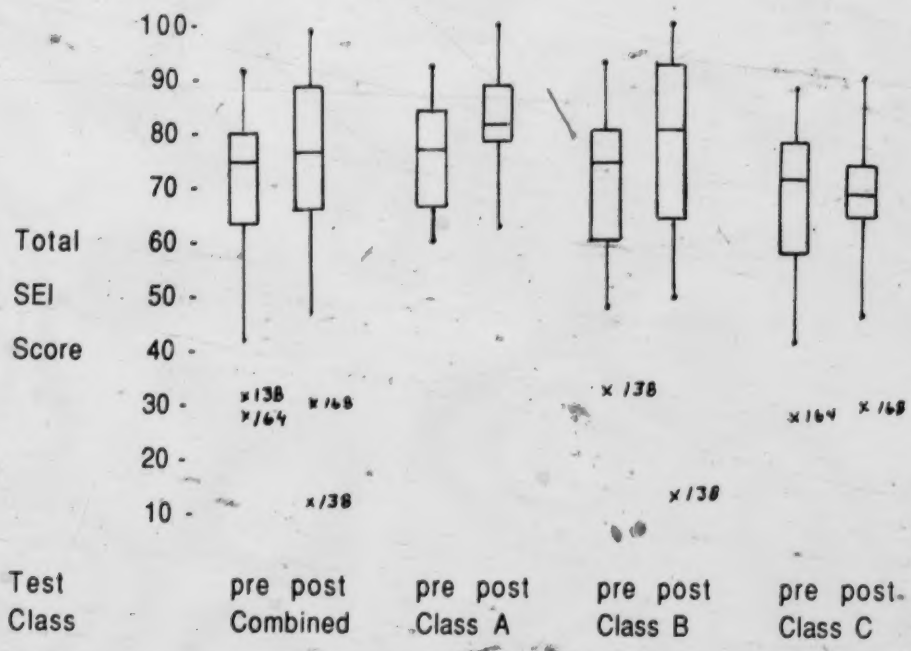
Results of Analysis of Variance by Classes [F(prob)]

Source	total SEI	school	social	home
Time	7.07(.01)	1.85(.18)	6.74(.01)	3.32(.08)
Class	2.66(.08)	1.98(.15)	1.24(.30)	2.56(.09)
C * T	0.99(.38)	0.65(.52)	0.07(.93)	1.61(.21)

The box-plots in Figure 4-1 of the Total SEI scores depicts how the scores changed in each class and for the combined group. In the combined group the minimum, first quartile, median, third quartile, and maximum increased from 3 to 6 points from the pretest to the posttest. The distance between quartiles increased 4 points. Thus for most of the students, self-esteem appeared to increase, however the scores were slightly more spread apart.

FIGURE 4-1

Box-Plots of Total SEI Scores by Combined Group and by Class



In Class A the minimum, first quartile, median, third quartile, and maximum increased 2 to 8 points; the distance between quartiles decreased 8 points. In Class B the minimum, first quartile, median, third quartile, and maximum increased 2 to 8 points; the distance between quartiles decreased 8 points. Class B had one student whose scores on the pretest and posttest were both considered to be outliers. In Class C, the minimum, first quartile, maximum points increased 2 to 6 points while the median and third quartile decreased 4 points; the distance between quartiles decreased

20 points. Class C had one student on the pretest and one student on the post test whose scores are considered to be an outlier. Therefore the effects on each class were different, however most students experienced an increase in self-esteem, but the change in the range of self-esteem scores varied. The range of scores in Classes A and B increased but the range decreased in Class C.

Effects on the grade sixes versus the grade sevens

The differences of means between classes as indicated previously were fairly large but not significant at the .05 level, therefore Class A and Class B were grouped together to form a grade six grouping. The means are presented in Table 4-3. Increases in the means were greater for the grade sixes than for the grade sevens in all areas measured.

TABLE 4-3

Means of Grades

	Grade Six		Grade Seven	
	pre	post	pre	post
Total SEI	71.8	77.9	66.5	67.8
Home	6.5	6.8	5.7	5.6
Social	6.3	6.7	5.5	6.1
School	5.1	5.7	4.4	4.4
	n = 30		n = 19	

An analysis of variance was conducted comparing the means of the grade sixes versus the grade sevens at the pretest and posttest. Results of the analysis are presented in Table 4-4. The difference of the means between the grade 6 classes combined and the grade 7 class was large but was not significant [F(1, 49) F = 3.35, p = .07] for the total SEI. There was a significance difference on the School subscale between the grades [F(1, 49) F = 3.89, p = .05) with grade six being higher both on the pretest and the posttest. The interaction was not significant.

TABLE 4-4

Results of Analysis of Variance by Grade [F(prob)]

Source	total SEI	school	social	home
Grade	*3.35*(.07)	3.89(.05)	2.12(.15)	2.11(.15)
Time	4.97(.03)	1.03(.31)	7.51(.01)	2.12(.15)
G * T	2.02(.16)	1.30(.26)	0.10(.76)	2.40(.12)

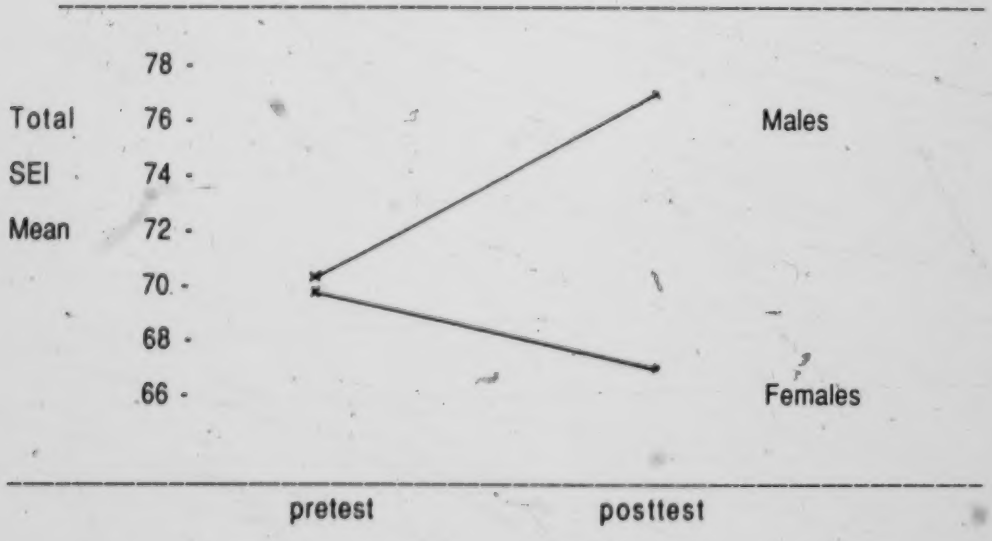
Effect on Gender

As previous research by Calsyn and Prost (1983) found that treatment seemed to make more of a difference for males than for females, the effect on gender was also investigated. A combined group of Class A and Class C males and females (Class B was not included because gender for the class

was not reported) was analyzed to determine if there were any interaction effects. Figure 4-2 depicts a small interaction effect [F(1, 30) F = 3.87, prob. = .058], of time over gender for the Total SEI. The self-esteem of the girls decreased slightly and the self-esteem of the males increased. For these two classes combined, the effect of time [F(1, 30) F = 1.35, prob. = .25] was not significant: Neither was there a significant difference observed between female self-esteem and male self-esteem [F(1, 31) F = 1.48, prob. = .23].

FIGURE 4-2

Interaction Effects of the Program on Females and Males



Without Class B included in the results a program effect was not observed, however the program seemed to have different effects on males than females. Interpretation of these results, without having the gender of Class B reported, limits interpretation, as it is unknown whether this interaction would be similar with Class B data included: However, these results are harmonious with Calsyn and Prost's (1983) findings that affective education programs seem to make more of a difference for males than females.

In summary, the effect of the program on self-esteem as measured by the SEI is outlined as follows:

1. A significant increase in self-esteem was observed in global self-esteem (Total SEI), as well as with the evaluative attitudes toward the self in social areas (Social Self-Peers).

2. The difference between the global self-esteem of grade sixes and grade sevens was not significant; however, there was a significance difference on school academic self-esteem. Grade 6 students were observed to have higher self-esteem than grade 7 students on the SEI subscale of school self-esteem on both the prestest and posttest.

3. Involvement in the program appeared to have a positive effect on males and a slight negative effect on the girls. However, this interaction was small.

Data Analysis on the Behavioral Academic Self-Esteem (BASE)

Student self-esteem as measured by the BASE will increase after participating in the Skills for Adolescence program.

Table 4-5 reveals the means of the combined group and the classes. The analysis of variance results indicated a significant difference due to time [F(1, 54) F = *22.56*, p<.01]; as well as a significant interaction of time over class [F(2, 54), F = 6.11, p <.01]. Post hoc comparison between the three classes using the Scheffe revealed that Class B and Class C means increased significantly but Class A did not. Teacher observations of Class B and Class C became more positive; however, Class A remained virtually the same.

TABLE 4-5

Means of Combined Group and Classes of the BASE

Combined		Class A		Class B		Class C	
pre	post	pre	post	pre	post	pre	post
53.4	56.4	58.1	58.2	51.2	56.7	51.7	54.5
n = 57		n = 16		n = 19		n = 22	

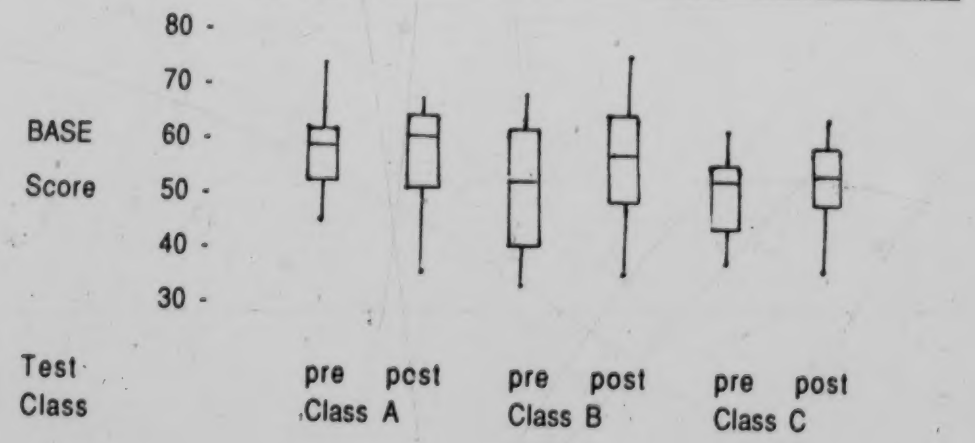
It is interesting to note that on the analysis of variance between classes for the pretest, a difference between classes was observed [(2, 62)

F = 3.59, p = .03]. Post hoc comparisons using the Tukey (b) test revealed that Class A teacher's perception of students' self-esteem means were significantly higher than Class B and Class C on the pretest.

Looking at Figure 4-3, the BASE scores for Class A appeared to have changed differently than for the other classes. Both the minimum and maximum score decreased, the minimum by 10 and the maximum by 7. The first quartile and the median increased slightly while the third quartlie decreased slightly. In contrast, all 5 statistical indicators for Class B increased, ranging from 2 to 8 points, whereas in Class C the first four statistical indicators increased 2 to 4 points while the minimum point decreased one.

FIGURE 4-3

Box-Plots of BASE Scores by by Class



Upon examining Figure 4-3, one can see that five points for Class A at the pretest were very similar or higher than the five points for Class B and Class C on the posttest. Knowing that the maximum score was 80 and by comparing the changes to Class B and C, it appears that a ceiling effect was operating against Class A. However, the drop of 10 points on the minimum score and the decrease of the third quartile score also influenced the outcome.

The SEI scores revealed previously also presented the highest means for Class A. Although this difference was not significant [(2, 48) $F = 2.66$, $p = .08$], it could be considered marginal. Both the SEI scores and the BASE scores for Class A were the highest; as well as, the SEI scores changed the most from pretest to posttest. This observation, although marginal, that Class A seems to have higher teacher observed student self-esteem and higher student reported self-esteem is consistent with Thomas' (1981) contention that teachers' perception of students is important in enhancing student self-esteem.

The BASE correlations as shown in Table 4-6 were lower than the expected results that would have been predicted from Johnson et al.'s claim that the BASE and SEI have convergent validity. The correlation of Class B at the posttest ($r = .43$, $p = .04$) seems to indicate that the Class B teacher perception's of students' self-esteem was more consistent with his or her

students' self-reported self-esteem. Class A and Class C correlations were not significantly different than zero.

TABLE 4-6

Correlation of BASE with SEI

	Combined		Class A		Class B		Class C	
	pre	post	pre	post	pre	post	pre	post
r	.30	.35	.28	.25	.33	.43	.05	.08
p	.02	.01	.18	.20	.11	.04	.41	.37
	n=49	n=49	n=18	n=13	n=16	n=17	n=20	n=19

In summary, teachers' observation of student self-esteem appeared to change due to the Skills for Adolescence program. The change was greater for the two classes that had lower teacher observed self-esteem scores to begin with. This difference in the change of scores may be partially due to a ceiling effect operating against Class A. Class B teacher's observations of student self-esteem seemed to become more consistent with students' reported self-esteem. Perhaps the teacher may have known his students better at the end of the program and was able to reflect more accurately students' self-esteem. Another possibility is that Class B pretest scores may have been biased by a defensive response and the posttest results were

more accurate and more consistent with teacher reported self-esteem.

Data Analysis on the Self-Concept Scale (SCS)

Student self-concept (self-esteem) as measured by the SCS will increase after participating in the Skills for Adolescence program.

The correlations of the subtests with each other varied from .30 to .60 while the correlation of the subtest with the total SCS varied from .64 to .81. Therefore the subscales were not considered to be independent and a multivariate analysis of variance was conducted. Table 4-7 shows the means of the classes and the combined group of Class B and Class C (as explained in the methodology, Class A did not write the pretest for the SCS).

TABLE 4-7

Means of Combined Group and Classes on the SCS

	Combined		Class B		Class C	
	pre	post	pre	post	pre	post
DM	37.6	38.5	38.3	41.4	36.8	35.5
IR	45.3	45.9	46.1	48.1	44.3	43.6
RE	48.0	47.2	47.7	49.0	48.3	45.3
TL SCS	231.7	231.6	231.8	239.4	231.5	223.6
	n = 42		n = 21		n = 21	

A further analysis was conducted on the posttest means of all three classes, as well as the means of 50 grade 6 students and 50 grade 7 students from a nearby community are revealed in Table 4-8. The 100 students from a nearby community were given the test at approximately the same time that the students in the study were given the posttests. The 100 students were not participating in The Skills for Adolescence program.The posttest means for decision making (DM) were not significantly different [$F(4, 156)$ $F = 4.98$, $p < .01$) between classes.

TABLE 4-8

Means of Posttest Classes, Grade 6 and Grade 7 on the SCS

	Class A	Class B	Class C	Grade 6	Grade 7
DM	38.9	41.4	35.5	37.2	35.7
IR	48.1	48.1	43.6	42.1	39.6
RE	49.2	49.0	45.3	44.2	42.3
SCS	245.3	239.4	223.6	225.8	213.8
	n = 19	n = 21	n = 21	n = 50	n = 50

The posttest means for interpersonal relations (IR) were significantly different [$F(4,156)$ $F = 4.98$, $p < .01$). Post hoc comparison between the five groups using the Scheffe revealed that Class A and Class B means were

significantly different than the grade 7 means and borderline different from grade 6. The posttest means for responsibility (RE) were also significantly different [(F4, 156) F = 4.02, p < .01) between classes. Post hoc comparison using the Scheffe revealed that Class A and Class B means were significantly different than the grade 7 student means.

The total SCS scores were significantly different [F(4, 152) F = 5.51, p < .01], with post hoc comparison revealing again a significance difference occurring between Class A and Class B means and the grade 7 sample means.

These results are difficult to interpret. Although differences of the means due to the program was not observed, when Classes A, B, and C were compared to a sample group of grade six and seven student scores from a nearby community, the differences in the means on interpersonal relations, responsibility and total SCS were significant. One possibility is that without involvement in the program, student self-worth in these areas may have declined. This phenomenom of declining self-concept (self-esteem) in young adolescents was discussed by Silvernail (1981). Another possibility is that the students in Class B and C had higher interpersonal skills to begin with.

Data Analysis on the Mooney Problem Check List

Student perception of problems as measured by the Mooney will decrease after participating in the Skills for Adolescence program.

Table 4-9 reveals the means of the classes for the pretest and the posttest (Class A did not write the pretest). The means were analyzed using a two-way analysis of variance with Classes B and C, as well as an analysis of variance between Classes A, B and C. Neither analysis revealed a significant variance due to class. The difference due to program or interaction was also not significant. Therefore there does not appear to be a significant change in the number of problems that a student reported that they have due to their involvement in the program.

TABLE 4-9

Mooney Problem Check List Class Means

Class A		Class B		Class C	
pre	post	pre	post	pre	post
N/A	41.8	54.9	51.2	50.0	45.9
n = 19		n = 22		n = 22	

Relationship between Mooney and SEI

Student self-esteem is related to the number of problems that students reported that they have.

The correlations of the Mooney Problem Check List with the SEI on both the pretest and posttest were determined. Negative correlations were observed between the number of problems that students have and their reported self-esteem (pretest, $r = -.66$, $p < 01$; post test, $r = .-43$, $p < .01$). The observed correlations were significantly different than zero. Students' with lower self-esteem appeared to have more reported problems and students' with higher self-esteem had fewer problems. The posttest relationship was weaker, however the change was not significant at the .05 level.

CHAPTER FIVE

SUMMATIONS AND IMPLICATIONS

This chapter provides the summary and discussion of findings, as well as a brief statement on the overall effectiveness of the program. Implications for further research are also included.

Summary and Discussion of Findings

The implementation of the Skills for Adolescence program appeared to have some positive influences on students in the classes studied. Changes were observed in two areas measured: student reported self-esteem and teacher observation of student self-esteem. Significant differences were not observed in student self-esteem related to decision making or interpersonal relationships nor were they observed in the number of problems that the students claimed that they had.

Student Reported Self-Esteem as Measured by the SEI

Scores in the first area, student reported self-esteem, as measured by the Self-Esteem Inventory (SEI) were observed to be in the positive direction for the global self-esteem scores and for the subscale of social self-peers. As peers are one of the major sources of positive self-esteem

for adolescents (Kokenes, 1989), it is not surprising that the training provided by the Skills for Adolescence program resulted in more positive evaluative attitudes toward the self in social areas, i.e., with their peers. The program topics that were taught are consistent with the beliefs of Kanopka (1973) and Kramer (1973) whereby interaction with peers, developing a sense of belonging, communication skills and conflict resolutions skills are important aspects of healthy development. These topics appear to be most relevant to the Social Self-Peers subscale.

The other two subscales, Home-Parents and School-Academic were not observed to be significantly different. In considering the former subscale, parent involvement was minimal for the first year of program implementation. As Bernard (1986) lists parent involvement as an important characteristic of an effective health education program, it is not surprising that the home parent self-esteem did not change significantly as parents were only involved through indirect activity. In considering the latter, perhaps the observation that the School-Academic subscale scores did not decrease is actually an indication of program effectiveness. According to Silvernail (1981), adolescent self-esteem is, if anything, for many students actually declining with each additional year of schooling. Therefore, the observation that student evaluative attitudes toward the self in school areas did not improve is expected.

The findings observed on the School-Academic subscale with grade seven students having lower self-esteem in school related areas than grade six students would appear to support Silvernail's (1981) belief that student's self-esteem decreases with increasing years in school.

The effect of the program did not seem to be different for the grade sixes than for the grade sevens. This finding appears to be in contrast to Rubin's (1978) findings that self-esteem ratings become more stable as young people move into early adolescence. However, when looking at the boxplots one can see that more of the grade six student scores were higher at the posttest than were the grade seven scores.

The reduction of class A class size from 28 to 19 students might also have influenced student self-esteem but the results of the analysis of variance from Table 4-2 did not indicate differences between the classes on the posttest or pretest when considering the SEI results. The BASE scores for Class A also did not appear to be affected by the reduction in class size as the scores did not change significantly from the pretest to the posttest.

As Calsyn and Prost (1983) found indications of gender differences due to treatment, the results on the SEI were further analyzed to explore the possibility of the Skills for Adolescence program having a different effect on boys that it did on girls. The results indicated a small interaction effect. The self-esteem of the girls decreased slightly while the

self-esteem of the boys increased. This result was consistent with Calsyn and Prost's (1983) research results.

Teacher observation of students' self-esteem as measured by the BASE

In the areas of teacher observation of student self-esteem as measured by the Behavioral Academic Self-Esteem (BASE), the scores obtained at the pretest and at the posttest were significantly different. BASE scores for class B and class C increased. Class A did not increase significantly, but this class at the pretest was already significantly higher than both the other classes and a ceiling effect seemed to be operating against class A.

Student self-esteem as measured by the SCS

Self-esteem as measured by the Self-concept Scale (SCS) did not increase significantly. However, it was interesting to note that the posttest scores of Class A and Class B, when compared to a sample of 50 grade six and 50 grade seven students from a nearby school district, were significantly higher in the interpersonal relations subscale. These students, albeit from an urban school district, were not involved in the Skills for Adolescence program. Two possibilities may explain why class A and B students' self-esteem score in interpersonal relations were not observed to increase, yet when compared to a sample group the scores were

observed to be significantly higher. One possibility is that perhaps these scores may have declined without participation in the program. The other possibility is that perhaps these students in this small town setting had higher skills in interpersonal relations to begin with.

The number of student reported problems

No change was observed in the number of problems that students reported that they had at the beginning of the program when compared to the end of the program. Further exploration was made to determine if the number of problems that students reported that they had was correlated with their reported self-esteem. Students with lower self-esteem appeared to have more reported problems and students' with higher self-esteem had fewer problems. These observations prompt a question for further research, "Is self-esteem related to the number of problems that students actually have or is it related to how students cope with their problems?

Conclusion

Student reported self-esteem as measured by the SEi and teacher observation of student self-esteem as measured by the BASE were both observed to have increased significantly. These results concur with

Swisher, Vicary, & dadenicheck's (1983) review findings that affective education programs can enhance student self-esteem. The positive effects of the Skills for Adolescence program were consistent across three different classes, each having different implementation strategies. The effects were also consistent across the two grades studied but not across gender.

The implementation of the Skills for Adolescence program involves considerable expense due to the requirement by Quest International Center that teachers participate in the facilitator training workshop before implementing the program. Despite the drawback of expense and perhaps partially because of the required training, the Skills for Adolescence program seems to be an effective program in enhancing students' self-esteem.

Implications for Further Research

The results of this study provide indication that the Skills for Adolescence program was effective in enhancing students' reported self-esteem and teachers observation of students' self-esteem. Additional research is need to determine if these findings can be generalized to other teaching situations and other school populations.

Further research may also be worthwhile to explore the influence of

pre-implementation program training for teachers, teacher attitudes and behaviors towards their students, teacher-pupil interaction, and/or classroom climate on the effectiveness of Skills for Adolescence program. Another worthwhile area of study would be to investigate the effectiveness of the program with different levels of parent involvement. In addition, a method of determining level of self-concept according to the more recent definitions of self-concept must be developed.

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